

## Advance Action Notice:

An Advance Action Notice must be sent when the current when the current applicant is receiving program services, but is **no longer functionally eligible** for services based on the Michigan Medicaid Nursing Facility Level of Care Determination and attempts at discharge planning have failed. The Nursing Facility Transition Team is available to assist.

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(Nursing Facility Letterhead)  
Adverse Action Notice

## Advance Action Notice

Date:

Name:

Address:

City, State, Zip code

Dear \_\_\_\_\_:

Following a review of your long term care needs, it has been determined that you no longer qualify for nursing facility level services based on the Michigan Medicaid Nursing Facility Level of Care Determination.. You did not qualify under any of the following eligibility categories: Activities of Daily Living, Cognition, Physician Involvement, Treatments and Conditions, Skilled Rehabilitative Therapies, Behavior, or Service Dependencies.

Nursing facility level services will be terminated 90 days from the date of this notice. The final date of nursing facility level services will be \_\_\_\_\_. The legal basis for this decision is 42 CFR 440.230 (d).

If you do not agree with this action, you may request all or any of the following:

**Immediate Review:** To obtain an Immediate Review, you must contact the Michigan Peer Review Organization (MPRO) at 800-727-7223 before 12:00 PM (noon) of the next business day following your receipt of this notice.

**Medicaid Fair Hearing:** To request a Medicaid Fair Hearing, complete a "Request for an Administrative Hearing" (DCH-0092) form and mail it to:

**Administrative Tribunal  
Michigan Department of Community Health  
PO Box 30763  
Lansing, Michigan 48909**

The Medicaid Fair Hearing Request **must** be:

- **Received within 90 calendar days of the date of this notice**
- In writing, and
- Signed by you or a person authorized to sign for you

You will continue to receive the affected services until the hearing decision is rendered **if** your request for a fair hearing is received prior to the effective date of action as stated above.

Sincerely,  
(provider representative)